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CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/665,943
Filing Date	9/19/2003
First Named Inventor	Lin Healy
Art Unit	1713
Examiner Name	Mulcahy, Peter D.
Attorney Docket Number	42133-00009USC1

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number: 021875

☒ Please change the correspondence address for the above-identified application to:

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I am the:

- ☐ Applicant/Inventor.
- ☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature			
Name	Julie Thompson, V.P. R & D for Penreco, A Texas Partnership		
Date	June 13, 2005	Telephone	281-362-3155

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

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